AO 435
(Rev. 03/08)

Administrative Office of the United States Courts

TRANSCRIPT ORDER

Please Read Instructions:

FOR COURT USE ONLY
DUE DATE:

1. NAME John P. McAdams, AUSA	2. PHONE NUMBER (401) 709-5055	3. DATE 7/8/2013	
4. MAILING ADDRESS US Attorney's Office, 50 Kennedy Plaza - 8th Fl	5. CITY Providence	6. STATE RI	7. ZIP CODE 02903

8. CASE NUMBER CR 11-186-S	9. JUDGE Hon. William E. Smith	DATES OF PROCEEDINGS	
		10. FROM 6/18/2013	11. TO 6/18/2013
12. CASE NAME U.S. v. Joseph Caramadre		LOCATION OF PROCEEDINGS	
		13. CITY Providence	14. STATE RI

15. ORDER FOR

- [ ] APPEAL
- [x] CRIMINAL
- [ ] CRIMINAL JUSTICE ACT
- [ ] BANKRUPTCY
- [ ] NON-APPEAL
- [ ] CIVIL
- [ ] IN FORMA PAUPERIS
- [ ] OTHER

16. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested)

PORTIONS	DATE(S)	PORTION(S)	DATE(S)
[ ] VOIR DIRE		[ ] TESTIMONY (Specify Witness)	
[ ] OPENING STATEMENT (Plaintiff)			
[ ] OPENING STATEMENT (Defendant)			
[ ] CLOSING ARGUMENT (Plaintiff)		[ ] PRE-TRIAL PROCEEDING (Spcy)	
[ ] CLOSING ARGUMENT (Defendant)			
[ ] OPINION OF COURT			
[ ] JURY INSTRUCTIONS		[ ] OTHER (Specify)	
[ ] SENTENCING			
[x] BAIL HEARING	06/18/2013		

17. ORDER

CATEGORY	ORIGINAL (Includes Certified Copy to Clerk for Records of the Court)	FIRST COPY	ADDITIONAL COPIES	NO. OF PAGES ESTIMATE	COSTS
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CERTIFICATION (18. & 19.) By signing below, I certify that I will pay all charges (deposit plus additional).	ESTIMATE TOTAL	40.50

18. SIGNATURE /s/ John P. McAdams, AUSA	PROCESSED BY
19. DATE 07/08/13 DCN: M7028154	PHONE NUMBER

TRANSCRIPT TO BE PREPARED BY	COURT ADDRESS

	DATE	BY	
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